

Please type a plus sign (+) inside this box → +

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))

Attorney Docket No. 500.38950X00

First Inventor or Application Identifier Shuji SOGA, ET AL.

Title PRODUCT RECYCLY FEE PAYMENT METHOD AND SYSTEM

Express Mail Label No. _____

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

- * Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing)
- Specification [Total Pages 48]
 - Descriptive title of the Invention
 - Cross References to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference to Microfiche Appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
- Drawing(s) (35 U.S.C. 113) [Total Sheets 10]
- Oath or Declaration [Total Pages _____]
 - a. Newly executed (original or copy)
 - b. Copy from a prior application (37 C.F.R. § 1.63(d))
(for continuation/divisional with Box 16 completed)
 - i. **DELETION OF INVENTOR(S)**
Signed statement attached deleting
inventor(s) named in the prior application,
see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).

* NOTE FOR ITEMS 1 & 13 IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).

16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment:

 Continuation Divisional Continuation-in-part (CIP)

of prior application No: _____ / _____

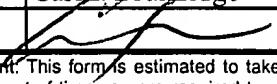
Group / Art Unit: _____

Prior application information: Examiner _____

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

17. CORRESPONDENCE ADDRESS

<input checked="" type="checkbox"/> Customer Number or Bar Code Label / (Insert Customer No. or Attach bar code label here)		020457		or <input type="checkbox"/> Correspondence address below		
Name _____						
Address _____						
City _____		State _____	Zip Code _____			
Country _____		Telephone _____		Fax _____		

Name (Print/Type)	Carl L. Brundidge	Registration No. (Attorney/Agent)	29,621
Signature		Date	08/28/2000

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

JC760 U.S. PTO
08/28/00JC714 U.S. PTO
09/28/00

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL

for FY 2000

Patent fees are subject to annual revision.

Small Entity payments must be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB-09-12. See 37 C.F.R. §§ 1.27 and 1.28.

TOTAL AMOUNT OF PAYMENT (\$1,158.00)

Complete if Known

Application Number	
Filing Date	August 28, 2000
First Named Inventor	Shuji SOGA, ET AL.
Examiner Name	
Group / Art Unit	
Attorney Docket No.	500.38950X00

METHOD OF PAYMENT (check one)		FEE CALCULATION (continued)	
1. <input type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:		3. ADDITIONAL FEES	
Deposit Account Number	01-2135	Fee Description	Fee Paid
Deposit Account Name	Antonelli, Terry, Stout & Kraus	105 130 205 65 Surcharge - late filing fee or oath	0.00
<input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR §§ 1.16 and 1.17		127 50 227 25 Surcharge - late provisional filing fee or cover sheet	0.00
2. <input checked="" type="checkbox"/> Payment Enclosed: <input type="checkbox"/> Check <input type="checkbox"/> Money <input checked="" type="checkbox"/> Other		139 130 139 130 Non-English specification	0.00
FEE CALCULATION			
1. BASIC FILING FEE			
Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)		
101 690	201 345	Utility filing fee	690.00
106 310	206 155	Design filing fee	
107 480	207 240	Plant filing fee	
108 690	208 345	Reissue filing fee	
114 150	214 75	Provisional filing fee	
SUBTOTAL (1) (\$690.00)			
2. EXTRA CLAIM FEES			
Total Claims	Extra Claims	Fee from below	Fee Paid
11	-20** = 0	x 18	= 0
Independent Claims	9	- 3** = 6	x 78 = 468
Multiple Dependent			= 0
** or number previously paid, if greater; For Reissues, see below			
Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)		
103 18	203 9	Claims in excess of 20	
102 78	202 39	Independent claims in excess of 3	
104 260	204 130	Multiple dependent claim, if not paid	
109 78	209 39	** Reissue independent claims over original patent	
110 18	210 9	** Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2) (\$468.00)		SUBTOTAL (3) (\$0.00)	
Reduced by Basic Filing Fee Paid			

SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	Carl L. Brundidge	Registration No. (Attorney/Agent)	29,621	Telephone	703-312-6600
Signature				Date	08/28/2000

WARNING:

Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.